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#### BOOKSHELF

## **Tetanus**

Farokh Erach Udwadia, Oxford: Oxford University Press, 1994, Pp 154, £35. ISBN 0-195635787

About one million cases of tetanus occur annually throughout the world and most of these are from developing countries. Immunisation is a very effective method of prevention of this disease, but with the current inputs available to the health care systems in these countries, tetanus with its high mortality is likely to continue to be a substantial problem.

Our understanding of tetanus and its pathophysiology has made tremendous strides over the past 10 years. Yet these have not yet been translated to improving the care of tetanus patients in most situations, largely because of controversies in medical research and lack of comprehensive publications on the topic. Professor Udwadia's book on tetanus is timely, comprehensive, and fills a vacuum that needed to be filled.

The author gives an insight into the history of tetanus, its epidemiology, pathophysiology, and management. He also includes the results of methodologically sound experiments conducted by him on haemodynamics and respiratory functions in tetanus. Although these are a little observations seem to concur with

out of place, they substantiate the qualification of the author to write on this subject.

The book is generally well written and easy to read, although thorough editing could have improved it by reducing the length of sentences and eliminating minor mistakes.

Udwadia outlines the management that is being followed in II Hospital, Bombay, where a large number of tetanus patients are seen. These recommendations are based on personal experience and a critical scientist may rightly question the validity of some of the assertions, but one has to give credit to the low mortality in this centre. The kind of intensive and invasive care that is suggested by the author is not often feasible in countries where tetanus presents. I found that differing points of view on the conservative management of tetanus are not given due credit. The work by Sanders and colleagues from Roxol, Nepal, has shown very good results similar to those described by Udwadia yet without high-tech monitoring. I note that our own uncontrolled those of the author and suggest that conservative management in severe tetanus is associated with unacceptably high mortality. But these observations might be misleading since we know that it is the interest and care provided by the treatment team (nurses, respiratory technicians, and doctors) rather than the type of care that gives the excellent results obtained in different centres.

The book points to a major deficiency in our knowledge of tetanus, namely the lack of a well-validated predictive scale for the disease. Some scales have been partly validated but there are no comparative data to help decide which to choose. Most investigators continue to use their own methods of grading the severity of which makes medical disease. research on tetanus difficult to evalu-

My colleagues with whom I have shared the book are of the uniform opinion that it has given us an insight into the disease and allowed us to share the immense experience of the author. I am sure this publication will be very valuable to all those involved in the management of severe tetanus world wide.

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# Artificial nutrition support in clinical practice

Edited by Jason Payne-James, George Grimble, David Silk, London; Edward Arnold, 1995. Pp 573. £85. ISBN 0-340567600.

Nutrition is a field that is difficult to : place in any specific medical discipline. Therefore, books on nutritional support cut across multiple specialties—paediatrics, intensive care, trauma surgery, geriatric medicine, gastroenterology, to name a few. Most texts strive to present the basics of nutrition and metabolism in an encyclopaedic manner but also provide the specifics of "how to do it" so that the reader can administer the therapy. It is extremely difficult to successfully link the theoretical with the practical, but Artificial Nutrition Support in Clinical Practice achieves this balance by providing excellent concept chapters in addition to the detailed discussion of nutrition in the integrative management of specific disease processes. Edited by experts

enterology and nutrition at the Middlesex Hospital in London, the book contains 37 chapters reflecting nutritional support practices in Europe. Chapters on protein metabolism by Mike Rennie, nutrient absorption by George Grimble, and enteral diet choices by David Silk head the list of superb chapters that provide excellent resource information for the clinician. These chapters might be the best available discussions of the respective fields found in any textbook today; and they are all the more valuable because each contains exhaustive reference lists.

For nutritional support to be most effective in a cost-containing environment, early or prophylactic intervention should be employed. It is therefore particularly refreshing to

assessment by Simon Allison who uses sound clinical guidelines as the basis for nutritional intervention. A similar approach is applied by CA Repin in his chapter on nutritional support and the elderly, another high-risk group where cost-effective care can be achieved but the slightest complication from an invasive procedure may be devastating.

Product composition is changing, and many of these technical advances are covered in the chapter by Fürst and Stehle who discuss the new parenteral substrates such as dipeptides. Payne-James discusses the use of infusion via percutaneously placed silastic catheters, a technique that has enhanced safety. The chapter on adult micronutrient requirements written by Alan Shenkin is especially thorough. Discussion of this field is timely since many physicians propose the use of micronutrients and vitamins as effective antioxidants in various disease states; an excellent from the department of gastro- review the chapter on nutritional table is available in this chapter which

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provides usual micronutrient requirements and details of methods of assessing deficiency states.

Finally, chapters on nutrition and HIV illness and nutrition in patients with inflammatory bowel disease give up-to-date discussion about the nutritional care of patients with these disorders.

During periods of rapid change, medical texts may become quickly

outdated, or contain areas of information that are superficially covered. This text in its next edition will need to include discussions on the use of multifrequency bioelectrical impedance, the use of vitamins and cofactors as antioxidants, and the application of growth factors to nutritional support—all these are rapidly growing fields. Whereas many multiauthored texts provide an uneven

flow of information and great variability in style, this book is readable with many excellent chapters and a superb index. It is recommended to all those who offer nutritional care as part of their daily practice.

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### **Aneurysm surgery**

Irwin Faris, Brian Buxton. Edinburgh: Churchill Livingstone. 1995. Pp 282. £125. ISBN 0-443046417.

This monograph is the second volume on vascular surgery in the series "Practice of surgery" and those who enjoyed reading the first title, *Arterial Surgery of the Lower Limb* by P R F Bell, will not be disappointed.

The presentation is succinct and all the aneurysms that lie within the domain of the peripheral vascular surgeon are included, despite the book's small size. Even uncommon problems such as abdominal aortic aneurysm surgery in the presence of horseshoe kidney, renal ectopia, and major vein anomalies are covered. While due importance and space are given to thoracic and abdominal aortic aneurysms, other peripheral aneurysms occupy nearly half of the book. Peripheral aneurysms are relatively uncommon and have seldom been covered in such detail in other texts on operative surgery; the book is particularly valuable in this respect. The layout of the page in three columns, with frequent sub-headings and over 200 clear diagrams, makes it easy and enjoyable to read. All of the 26 chapters have been written by the two principal authors with the exception of 3 chapters in the section on and thoracoabdominal thoracic aneurysms. This has ensured consistency in style and avoided repetition. The techniques described are generally well accepted and it was hard to find anything controversial. The information on computed tomography scanning for assessment of an aortic aneurysm and the role of thrombolytic therapy for popliteal aneurysms presenting with acute ischaemia may not be totally up to date and accurate but these are minor deficiencies and do not detract from the value of this excellent book.

Aneurysm Surgery will not only fulfil its purpose as an extremely useful reference source for vascular surgical trainees; other general surgeons who are not dedicated vascular surgeons will also find it most helpful. It has a place on the shelf of every unit in which vascular surgery is done.

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### **Migraine**

Manifestations, pathogenesis and management.—Robert A Davidoff. Philadelphia: F A Davis. 1995. Pp 375. \$85. ISBN 0-803623607.

Single-author textbooks have become a rare phenomenon as we are slowly submerged by information overload. This work is an impressive review of migraine from all angles, and represents a physician's lifetime study of the subject, contained within 12 chapters and supported by 2210 references.

All aspects of headache are reviewed critically, in depth, and in some respects to the point of negativity, for example the first chapter on the definition of migraine. We are told that there is a lack of definition for migraine, no objective pathology, no diagnostic tests, and no such thing as a migraine personality. Migraine still does exist, I presume? In describing clinical aspects and effects of prophylaxis many conflicting views are presented, leaving the reader somewhat dazed. Someone probably has the right answers—it is a matter of slogging through the methodology and discarding those papers that are sloppily designed, which this author has not always done. More in-depth appraisal is found in the section on vascular changes. Again no firm conclusion is reached, but the reasons are better delineated.

Pizotifen is a popular prophylactic (dare I say effective?) with UK and European neurologists, but receives very little mention here. Conversely several columns are given to monoamine oxidase inhibitors and methysergide which are fairly unpopular drugs on this side of the Atlantic.

I would have liked to see more on the management of hemiplegic migraine—is it safe to give sumatriptan for instance? I would like to see mitochondria in drawings of platelets, and perhaps more discussion of the possibility of a mitochondrial basis to migraine itself.

The above are more niggles than criticism. This monograph is readable and comprehensive. It should be an ideal, if not essential, reference work for neurologists and migraine specialists.

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# Selected books: nephrology

Treatment Strategies for Chronic Renal Failure.—Edited by C Zoccali.
Basel: Karger. 1994. Pp 120.
SFr123/DM147/\$98.50.
ISBN 3-805558686.

Shared Care for Prostatic Diseases.— Roger Kirby, Michael Kirby, John Fitzpatrick, Andrew Fitzpatrick. Oxford: ISIS Medical Media. 1994. Pp 180. £17.50. ISBN 1-899066004.

Benign Prostatic Hyperplasia: Recent Progress in Clinical Research and Practice.—Edited by Karlheinz Kurth, Donald W W Newling. New York: Wiley-Liss. 1994. Pp 644. \$125. ISBN 0-471303550.

Clinical Paediatric Nephrology (2nd edn).—Edited by R J Postlethwaite. Oxford: Butterworth-Heinemann. 1994. Pp 411. £65. ISBN 0-750613475.